

COMMUNITY SERVICES Irvine Animal Care Center

CAT ADOPTION INTEREST FORM

Thank you for your interest in adopting a new family member from the Irvine Animal Care Center (IACC). In an effort to help you find your match, please provide the following information. Adopters must be 18 years or older.

NAME*							
ADD	DRESS*		PREFERRED PHONE*				
		1					
CITY	/	STATE	ZIP	EMAI	L*		
HOW MANY PEOPLE LIVE IN YOUR HOUSEHOLD?			SENIORS MAY O	SENIORS MAY QUALIFY FOR SPECIAL PRICING:			
			ARE YOU 62 YEARS OF AGE OR OLDER?				
ENTER THE NAMES OF THE CATS YOU ARE INTERESTED IN (LIST UP TO 3):							
TELL US ABOUT YOU (Check all that apply):							
1.	I WOULD CONSIDER MY HOUSEHOLD TO	BE:			IN THE MIDDLE		
2.	I WANT MY CAT TO BE:		OUTGOING & PLAYFUL	CUDDLY & SOCIAL		QUIET & INDEPENDENT	
3.	MY CAT WILL LIVE:			INSIDE/OUTSIDE			
4.	MY CAT NEEDS TO BE ABLE TO BE ALONE:		ALL DAY	4-8 HOURS		4 HOURS OR LESS	
5.	IF YOUR CAT SCRATCHED YOUR FURNITUR		IT FIND APPROPRIATE				
6. IT IS MOST IMPORTANT TO ME THAT MY CAT:							
7.	• MY CAT NEEDS TO BE COMFORTABLE WITH:		NEW PEOPLE			OTHER PETS	
8.	8. PLEASE LIST OTHER PETS, IF YOU HAVE THEM:		SPECIES		BREED	AGE	
Thank you for your honest answers. The information you provide will help us find a pet that is a good fit for you.							



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INTERACTION WAIVER

Animals at the Irvine Animal Care Center (IACC) come from a variety of situations and environments. We may have limited or no background information about an animal's behavioral status or history. In addition, animals in a shelter environment may react differently than in a home environment. Due to this, the IACC does not recommend rough or excited play, holding, or cuddling with our animals during your visit. All children under the age of 16 must be supervised at all times by the child(ren)'s parent, legal guardian, or a responsible adult while at the IACC. It is important to follow any cautions or interaction strategies recommended by staff to help ensure a positive experience for both you and the animal you are meeting.

By signing this document, I understand that interacting with any animal at the IACC poses a potential risk of injury either from a bite or scratch. I agree to interact with the animal(s) in a respectful and humane manner. If I do sustain any type of injury involving the pet I am interacting with, I will report it to an IACC staff member immediately.

ADOPTER NAME*

DATE

AUTHORIZED STAFF SIGNATURE

DATE

ADOPTER SIGNATURE*